

UNITED STATES OF AMERICA
BEFORE THE NATIONAL LABOR RELATIONS BOARD
REGION 14

BARNES-JEWISH HOSPITAL

Employer

and

Case 14-RC-12196

LOCAL UNION NO. 562, UNITED
ASSOCIATION OF JOURNEYMEN AND
APPRENTICES OF THE PLUMBING AND
PIPEFITTING INDUSTRY OF THE U.S. AND
CANADA, AFL-CIO

Petitioner

REGIONAL DIRECTOR'S DECISION AND
DIRECTION OF ELECTION

Upon a petition duly filed under Section 9(c) of the National Labor Relations Act, as amended, a hearing was held before a hearing officer of the National Labor Relations Board, hereinafter referred to as the Board.

Pursuant to the provisions of Section 3(b) of the Act, the Board has delegated its authority in this proceeding to the undersigned.

Upon the entire record in this proceeding, the undersigned finds:

1. The hearing officer's rulings made at the hearing are free from prejudicial error and are hereby affirmed.
2. The Employer, Barnes-Jewish Hospital, is engaged in commerce within the meaning of the Act and it will effectuate the purposes of the Act to assert jurisdiction herein.¹
3. The labor organization involved claims to represent certain employees of the Employer.

¹ The Employer is a non-profit corporation engaged in the operation of an acute care hospital.

4. A question affecting commerce exists concerning the representation of certain employees of the Employer within the meaning of Section 9(c)(1) and Section 2(6) and (7) of the Act.

The Petitioner seeks to represent a skilled maintenance unit of approximately 110 employees at Barnes-Jewish Hospital (here Employer or BJH). The petitioned-for unit includes:

All full-time and regular part-time skilled maintenance employees employed by the Employer at its St. Louis, Missouri facility, including carpenters, electricians, general maintenance, HVAC&R (heating, ventilating, air conditioning and refrigeration) technicians, mechanics, painters, plumbers, and stationary engineers, EXCLUDING office clerical, professional employees, guards, and supervisors as defined by the Act.

The parties agree that the appropriate unit should conform to the skilled maintenance employee unit for acute care hospitals as defined by the Board's Final Rule on Collective-Bargaining Units in the Health Care Industry (the Rule).² The parties stipulated that the following positions should be included within the appropriate bargaining unit: senior HVAC/refrigeration mechanics, lead HVAC/refrigeration mechanics, utility workers, lead plumber, plumbers, insulator/plumber, lead electricians, senior electricians, lead mechanic, plant mechanics, lead stationary engineer, stationary engineers, senior GM mechanics, GM mechanics, lead carpenter, senior carpenters, lead painters, senior painters, lead design and construction, construction techs I, II and III, locksmith, and upholster. The parties agree that the one locksmith on the BJH payroll is appropriately included in the unit, and that the senior HVAC mechanic (BAS operator) is appropriately excluded from the unit. While the Employer originally sought to include the positions of mechanical engineer and electrical engineer in the unit, the Employer withdrew its request for the inclusion of these two positions in its post-hearing brief. The Petitioner agrees the mechanical engineer and electrical engineer are appropriately excluded from the unit.

² The Rule is set forth at 29 CFR Part 103, 54 Fed.Reg. 16336, 16347-16348, 284 NLRB 1579, 1596-1597 (1989). Detailed explanations regarding each segment of the Rule are found in the Second Notice of Proposed Rulemaking, 29 CFR Part 103, 53 Fed.Reg. 33900 (1988), 284 NLRB 1527 and in the Final Rule, 54 Fed.Reg. 16336, 284 NLRB 1586 (1989).

While the Petitioner maintains that there are approximately 110 employees in unit, the Employer contends that the appropriate skilled maintenance unit includes a total of 184 employees. In addition to the stipulated inclusions, the Employer would include contractor coordinator, signage coordinator, signage fabricator, CADD operator/plans coordinator, wire/cable coordinator, biomedical techs I, II and III, electronic equipment and systems specialists I, II and III, radiology and imaging systems specialists I, II and III, clinical engineering projects coordinator, IS analysts, IS electronic equipment and systems specialists I, and the two locksmiths who on the payroll of St. Louis Children's Hospital. After careful review of the record and exhibits, I find that the appropriate bargaining unit contains approximately 179 employees.

I. OVERVIEW

The Employer was created by the 1996 merger of the former Barnes Hospital and Jewish Hospital of St. Louis. The Employer is the largest hospital in the BJC Health System, which provides a full continuum of services through an integrated network of hospitals, nursing homes, and other healthcare delivery settings. BJH employs approximately 9,000 employees and has a physical plant of over 5 million square feet.

The skilled maintenance employees are engaged in the repair, maintenance and installation of equipment for the hospital and are not involved in direct patient care. These employees work in the Departments of Facilities Engineering, Clinical Engineering, Information Services, and Design and Construction, and Housekeeping and Security. Facilities Engineering has 117 employees classified as HVAC, plumbing, electrical, mechanical, power plant and general maintenance, carpentry, and painter, as well as the following positions in dispute: contractor coordinator, signage coordinator, signage fabricator, CADD operator/plans coordinator, and wire/cable coordinator. Clinical Engineering has 46 employees in the classifications of biomedical techs (BIOMET) I, II and III, electronic equipment and systems specialists (EESS) I, II and II, radiology and imaging systems specialists (RISS) I, II and III, and clinical engineering projects coordinator, all of whom are in dispute. Information Services (IS) has 10 employees employed in

IS analysts and IS EESS I positions, whose unit placement is in question. Security employs three locksmiths, two of whom are in issue. Housekeeping employs one upholsterer.

All of the Employer's employees, including the employees in question, fill out the same BJC Health System application for employment, attend the same new employee orientation program, and receive the same employee handbook. The handbook encapsulates BJC policies and procedures for service expectations and standards, employee policies, benefits and compensation, and resources, services and conveniences for employees. Employees who desire a transfer within their entity or another BJC entity fill out a BJC transfer form. If an employee transfers from one department to another or to another entity, the employee does not lose benefits or seniority. All employees receive performance appraisals that are defined by BJC. All employees here receive the same benefits, are subject to the same attendance policy and grievance procedure, are paid on the same payday, and wear a BJH badge. All employees have the same access to the cafeteria, check cashing services, ATM machines, coffee bar, gift shop, chaplain services, employee assistance, occupational health, and resale shop.

While there is no history of collective bargaining for any of these employees involved, elections involving skilled maintenance employees were directed in Jewish Hospital, 305 NLRB 955 (1991) and Barnes Hospital, 306 NLRB 201 (1992).

II. BOARD LAW REGARDING SKILLED MAINTENANCE UNIT IN ACUTE CARE HOSPITAL

The Employer is an acute care hospital. On April 21, 1989, the Board issued the Rule in which it determined that with respect to acute care hospitals eight units, including a unit of all skilled maintenance employees, shall be appropriate for collective-bargaining purposes and the only appropriate units, absent "extraordinary circumstances." 54 Fed.Reg. 16336, 16347-16348, 284 NLRB 1159, 1596-1597 (1980). Ingalls Memorial Hospital, 309 NLRB 393 (1992); see also, St. Margaret Memorial Hospital, 303 NLRB 923 (1991).

In the Second Notice of Proposed Rulemaking, the Board described skilled maintenance employees as those employees who are generally engaged in the operation, maintenance, and repair of the hospital's physical plant systems, such as heating, ventilation, air-conditioning, refrigeration, electrical, plumbing, and mechanical, as well as their trainees, helpers, and assistants. 53 Fed.Reg. 33900, 33920-33924 (1988), 284 NLRB 1527, 1557, 1561. The Board also noted that skilled maintenance classifications typically require completion of high school, some post-secondary training, such as vocational or trade school in the field, formal or informal apprenticeship programs, an associate or bachelor degree, and also require continued education in technological changes in building maintenance. The Board found that skilled employees frequently have separate supervision by the hospital's plant engineering or maintenance department, higher wage rates reflecting higher skills and training, only incidental contact with employees outside the maintenance department, and no direct involvement in patient care. Ingalls Memorial Hospital, supra.

A skilled maintenance unit generally includes those employees who perform skilled maintenance work, who fill the position of a trainee, or who serve as helpers or assistants to skilled maintenance employees in the performance of their work. Ingalls Memorial Hospital, 309 NLRB at 394-395; Barnes Hospital, supra. The distinguishing feature of skilled maintenance employees is their work on systems and equipment as opposed to involvement in direct patient care. Jewish Hospital, supra.

When developing the eight units in the course of the rulemaking proceedings, the Board extensively considered matters, including community of interest factors and determined that a skilled maintenance unit was an appropriate unit. St. Margaret, 303 NLRB at 924. The focus of the inquiry, therefore, is not on the traditional community of interest standard utilized in industries beyond health care but on whether the disputed classifications possess skills and are required to perform job duties similar to other skilled maintenance classifications. St. Luke's Health Care Assn., 312 NLRB 129, 131 (1993).

III. THE DISPUTED CLASSIFICATIONS

A. Facilities Engineering Department

The Facilities Engineering Department has three divisions: (1) plant operations and building systems maintenance, which includes HVAC, plumbing, electrical and mechanical; (2) customer services/building finishes, which includes power plant and general maintenance, carpentry, and paint, as well as the contested positions of the contractor coordinator, signage coordinator and signage fabricator; and (3) engineering, where the excluded mechanical engineer and electrical engineer work, as do the contested positions of CADD operator/plans coordinator and wire/cable coordinator.

1. CADD Operator/Plans Coordinator (CADD Operator)

CADD is a reference to computer-assisted design and drafting. The CADD operator duties are to provide CADD drawings to various craft shops in order to implement repairs and enhancement of the building systems. The CADD operator is responsible for entering system changes in the computer and keeping records of the systems and the work performed on the systems, such as plumbing and electrical work. The CADD operator does not take apart, repair or change parts on any pieces of equipment. The CADD operator does not perform maintenance on equipment, plumbing, carpentry, or direct electrical work.

The qualifications for this position include technical computer skills and understanding of building plans and the construction process. The stated requirement for this position is an associate's degree, 3-5 years experience in a technical field, and 3 years CADD experience related to mechanical, electrical and fire protection systems. The incumbent is about 1-month away from graduating with a trade school degree. With the exception of the utility worker who is a job grade 5 and the GM mechanics, who are the same job grade 13 as the CADD operator, all of the Facilities Engineering employees stipulated as included in the unit are at job grades 15, 16 and 17.

This evidence, and the record evidence as a whole, does not show that the CADD operator performs any skilled maintenance on the hospital's physical plant systems, nor does it show that he fills the position of trainee or acts as a helper or assistant to skilled maintenance employees in the performance of their work. Thus, like the draftsman excluded from a skilled maintenance unit in Ingalls, the CADD operator falls into none of the categories which the Board has stated should be included in a skilled maintenance unit under the Rule. Ingalls Memorial Hospital, supra at 398 (draftsman maintained a library of hospital blueprints through a computer-assisted design program, made blueprints and drawing available as necessary, and updated the blueprints in consultation with mechanics and electricians). Accordingly, I shall exclude the CADD operator from the skilled maintenance unit found appropriate here.

2. Wire/Cable Coordinator

The wire/cable coordinator position was filled 3 months prior to the hearing and was created 1 to 2 months prior to that. The wire/cable coordinator is responsible for the coordination of cabling by outside vendors and in-house telephone communications, IS employees, and security cabling. The wire/cable coordinator works above the ceilings and makes sure there is a pathway for the cables, also checks the fire walls and penetrations, and assures that the CADD database information on the facility's cabling and wiring is maintained. Before this position was created, the electricians performed these tasks.

The Director of Facility Engineering, the immediate supervisor, testified that the wire/cable coordinator was more like a building inspector who scheduled work to ensure that the work was performed correctly. Although the Vice President of Operations testified in response to leading questions that the wire/cable coordinator performed "hands on" work, the Director of Facility Engineering testified that the wire/cable coordinator did not perform any mechanical installations or pull wire.

The job description states that the wire/cable coordinator directs contractors during construction activities, coordinates development of wire/cable installation, and supervises/supports

installation of all wire/cable. This employee also maintains/updates wire/cable management programs, documents low voltage systems in CADD database and spreadsheet, and provides management of installation, identification, and documentation of low voltage wire and fiber optic cables.

The requirements for the position are a high school diploma, 6 months to 2 years specialized training, 1 to 3 years experience, and knowledge of Microsoft Access, Word and Excel. The record establishes that the incumbent wire/cable coordinator was formerly a general maintenance mechanic who has specialized training in the electrical field, including data signaling, and rudimentary computer skills, although the computer work is limited to documentation purposes. This position is a job grade 15.

The evidence shows that the wire/cable coordinator does not perform skilled maintenance work on hospital physical plant systems, nor does he fill the position of a trainee or act as an assistant or helper to skilled maintenance employees in the performance of their work. Despite the Vice President of Operation's contention that this employee is "hands on," the immediate supervisor testified, and the job description further demonstrates, that the wire/cable coordinator does not pull or install wires or cables. Thus, like the project support coordinator in Ingalls, the wire/cable coordinator does not fall into any category that the Board has stated should be included in a skilled maintenance unit. Ingalls Memorial Hospital, supra at 398 (project coordinator interacted with contractors and assisted in determining operations during construction; did not directly assign work or perform any skilled maintenance work). Accordingly, I shall exclude the wire/cable coordinator from the skilled maintenance unit found appropriate here.

3. Signage Fabricator and Signage Coordinator

The Employer employs a signage fabricator and a signage coordinator. The signage fabricator was excluded from the skilled maintenance unit in Barnes Hospital, supra. The signage coordinator position did not exist in 1992.

The signage fabricator duties are to work on layout; make and install signs; and use Graphic and Lettersmith machines, engraving equipment, and a table saw. The signage coordinator duties are to produce signs and work in layout to produce finished interior signage products for installation, maintain a signage library, and maintain and update directionals and lobby directories.

The record reflects that signage employees produce pieces for signs, room signs and overhead signs, primarily through a computer-assisted process that includes a \$27,000 piece of equipment that relies heavily on computer graphics. In addition to the computer technology, these employees use engravers, saws and exacto knives to produce signs. At least 50 percent of the work is currently performed utilizing computer technology and that will increase to over 75 percent in a short time, although the record does not establish that time period. In addition to making signs, the signage coordinator is responsible for calibrating the computerized equipment, and determining how to lay out the signs and where to place signs, which are installed by the design and construction employees, not by the signage coordinator or the signage fabricator.

The educational and vocational requirements for the signage fabricator include high school diploma plus 1 to 3 years experience. The signage fabricator requirements are high school diploma plus 3 to 5 years experience in a technical field and computer skills. The Director of Facilities Engineering testified that the computerized equipment vendor trained the signage coordinator for 2 weeks, who then trained the signage fabricator. The signage fabricator is a job grade 5, the lowest job grade of all employees involved here, and the signage coordinator is a job grade 14.

The evidence shows that both the signage fabricator and signage coordinator perform duties and work with equipment and tools that are unrelated to the hospital's physical plant or other complex hospital equipment. The fact that design and construction employees install the signs does not require inclusion of the signage fabricator and signage coordinator in the skilled maintenance unit. Neither employee requires education beyond high school. There is no special

training for these positions, rather simply 2-week training by the vendor of the signage coordinator who then instructed the signage fabricator. Thus, like the sign fabricators/reprographics repairman in Toledo Hospital, 312 NLRB 652, 654-655 (1993), the signage fabricator and signage coordinator are not skilled maintenance employees, or the trainee, helper or assistant of skilled maintenance employees. Accordingly, I shall exclude the signage fabricator and signage coordinator from the skilled maintenance unit found appropriate here.

4. Contractor Coordinator

The contractor coordinator's duties are to focus on building exterior finishes – roofs, sidewalks, garages - and to coordinate construction and renovations related to building exteriors, including development of schedules for assigned projects, development of cost estimates, management of budgets, review of purchases and preparation of reports. The Vice President of Operations described the position as requiring much communication and planning, but explained that the contractor coordinator does not have any duties that require him to directly fix, repair, or maintain the facility or equipment.

The contractor coordinator is required have a high school diploma and have more than 5 years experience in a related field. Although the contractor coordinator is a plumber by trade education, he does no plumbing work as contractor coordinator. The contractor coordinator is a job grade 28.

This evidence shows that the contractor coordinator does not perform skilled maintenance work on hospital physical plant systems, nor does he work as a trainee, apprentice, or a helper or assistant to skilled maintenance employees in the performance of their work. The position qualifications do not require special training or education beyond high school and experience in a related field. Like the project support coordinator in Ingalls, this position is “an advocate and facilitator” for construction and renovations. Ingalls Memorial Hospital, supra at 398. Accordingly, I shall exclude the contractor coordinator from the skilled maintenance unit found appropriate here.

B. Clinical Engineering Department

The Clinical Engineering Department was spun off from the Facilities Engineering Department in the late 1970s and is considered a separate department. The clinical engineering employees have performed their work at BJH for at least the last 3 years, despite the fact that these employees were maintained on the payroll of Missouri Baptist Medical Center, another hospital in the BJC Health System. On September 10, 2000, the clinical engineering employees were transferred from the Missouri Baptist payroll to the BJH payroll. The Clinical Engineering Department provides maintenance and repair services on clinical equipment. As noted, the Employer, contrary to the Petitioner, contends that all of the 46 employees in Clinical Engineering should be included in the unit.

1. **Biomedical Technicians I, II and III (BIOMETs), Electronic Equipment and Systems Specialists I, II and III (EESS) and Radiology and Imaging Systems Specialists I, II and III (RISS)**

Twenty-five employees are classified as biomedical technicians I, II or III (BIOMET), 5 employees are employed as electronic equipment and systems specialists I, II or III (EESS), and 15 employees are radiology and imaging systems specialists II or III (RISS). No one currently fills a RISS I position. The differences in the positions are based upon the types of clinical equipment they work on.

a. BIOMETs

The BIOMETs predominantly calibrate and perform preventive maintenance, diagnostics and repair on pieces of equipment, such as EKG machines, ventilators, dialysis machines, lab equipment and infusion pumps. The lengthy job descriptions of the BIOMETs states they perform assurance inspections, installation, testing, calibration, troubleshooting, maintenance and repair of medical instrumentation in systems; require skills in reading and interpreting analog and digital circuit schematic diagrams, integrated circuit data sheets, and system hardware documentation; require knowledge in a variety of scientific disciplines and in the use of analog and digital electronics, microprocessor based systems, data conversion and communication; require skill in the use of standard testing equipment including capacitor/inductor analyzers, spectrum analyzers,

oscilloscopes, electrical safety analyzers, digital multi-meters, frequency counters, cable tracers, simulators and biomedical instrumentation analyzers; and require knowledge in anatomy/physiology and chemistry. In addition, the BIOMETs III provide technical leadership in the performance of these duties and require excellent leadership and technical abilities, including application of troubleshooting techniques to electronic systems and knowledge of computer operating systems' commands and programming in various software applications.

The requirements for the BIOMETs are an associate's degree or equivalent experience, with preference for education in biomedical engineering technology, and, depending on the level, from 3 months to 5 plus years of experience. The BIOMET III also requires certification. The record shows that BIOMETs are required to have some knowledge of anatomy, physiology and chemistry, and wear lab coats. The BIOMETs usually have an associate's degree, with background in electronics; and, in addition, they receive training for specific equipment through the manufacturers. The job grades for the BIOMETs I, II and III are grades 13, 15 and 18, respectively.

b. EESS

The electronic equipment and systems specialists (EESS) work on equipment such as intercom systems, nurse call system, cabling, and television installation. The detailed job description of the EESS states they perform assurance inspections, installation, testing, calibration, troubleshooting, maintenance and repair of electronic instruments and systems; require knowledge in scientific disciplines including computer operating system commands, programming and software applications, and electronic terminology; require knowledge in the use of analog and digital electronics, microprocessor based systems, data conversion and communication; require skills and use of standard test equipment including capacitor/inductor analyzers, spectrum analyzers, oscilloscopes, fiber optic loss analyzers, RF field strength meters, electrical safety analyzers, digital multi-meters, frequency counters, and cable tracers. In addition, the EESS III

provides technical leadership in the performance of these duties and requires strong leadership abilities and excellent technical ability.

The record shows that EESS employees must have an associate's degree, with some preferences given to individuals with electronic engineering technology experience. The stated requirements for the EESS job is an associate's degree or equivalent experience in electronic engineering technology and, depending on the level, 3 months to 5 plus years experience. The job grades for the EESS I, II and III are grades 13, 15 and 17, respectively.

c. RISS

The RISS II and III employees perform preventive maintenance, installation and repair on radiology equipment and nuclear medicine, radiation therapy and imaging systems. The extensive RISS job duties state they perform preventive maintenance, performance assurance inspections, installation, testing, calibration, troubleshooting, maintenance, and repair of one or more categories of equipment, including radiology, nuclear medicine, radiation therapy and/or imaging systems; assist in the design and development of equipment inspection procedures, test setups, documentation forms, and support program development; and provide advanced or expert levels of support for one or more highly sophisticated systems.

The record establishes that RISS employees, at a minimum, have an associate's degree or equivalent experience. Bachelor's degrees in engineering are preferred for these positions but no incumbent holds a bachelor's degree. The stated requirements for the RISS employees are an associate's degree or equivalent experience and, depending on the level, 2 to 5 years experience in a technical field. A bachelor's degree in engineering or engineering technology of associate degree in engineering technology plus 1-year applicable experience is preferred, in addition to skill and knowledge in radiation safety. The job grades for RISS I, II and III are 17, 18 and 19, respectively.

d. BIOMETs, EESS and RISS are Skilled Maintenance Employees

The Board repeatedly has included hospital biotechnology maintenance and repair employees in a skilled maintenance unit where they perform skilled work on complex, sophisticated machinery. Toledo Hospital, 312 NLRB at 652-653; Ingalls Memorial Hospital, 309 NLRB at 396-397; San Juan Medical Center, 307 NLRB 117 (1992). These employees are in a different department, “while perhaps a factor to be considered, is not a touchstone in determining their unit placement.” Toledo Hospital, supra at 653, citing Jewish Hospital, supra. Maintaining and repairing patient-related equipment, rather than plant equipment, does not warrant excluding these employees from the skilled maintenance unit. Toledo Hospital, supra at 653, citing San Juan Medical Center, supra and Ingalls Memorial Hospital, supra. Accordingly, I find that the BIOMETs I, II and III, EESS I, II and III and RISS I, II and III are included in the skilled maintenance unit found appropriate here.

2. Projects Coordinator is a Skilled Maintenance Employee

The record reflects that the project coordinator spends approximately 50 percent of his time coordinating work projects, including the installation of medical equipment. The remainder of his time is spent uncrating, cabling, and installing medical equipment, and repairing call systems. This includes frequently assisting the EESS and RISS with their specific duties, such as helping pull cable, helping to troubleshoot problems with television cabling systems, and diagnosing proper remedies for repairs. According to the job description, the project coordinator provides technical expertise and assists in planning, installing and implementing medical equipment, communication, computer and/or entertainment systems during construction, renovation, and new equipment acquisition projects.

The requirements of the project coordinator are an associate’s degree plus 3 to 5 years experience, preferably with electronic equipment and systems. This position is a job grade 28.

The work performed by the project coordinator, which is similar to the work of the EESS and RISS, involves the installation and maintenance of the hospital’s physical plant systems. The medical equipment, communication, computer and entertainment systems are an integral and

necessary part of the physical plant. Thus, like the telecommunications technicians in Toledo Hospital, 312 NLRB at 654, the job functions of the project coordinator, together with the education and skill requirements, support a finding that the project coordinator performs skilled maintenance work. Accordingly, I shall include the projects coordinator in the skilled maintenance unit found appropriate here.

C. Information Services (IS)

The information Services (IS) Department was created after Barnes Hospital and Jewish Hospital merged in 1996. IS installs and troubleshoots computer equipment, software and systems. Prior to January 2000, the IS employees were on the Missouri Baptist Medical Center payroll. Since January 2000, these employees have been on the BJC Health System payroll, not the BJH payroll, although the IS employees spend at least 80 percent of their working time at BJH and wear BJH badges. As noted, the Employer, contrary to the Petitioner, contends that all of the 10 employees in IS should be included in the unit.

1. Information Services Electronic Equipment and Systems Specialists I (IS EESS) and Information Services Analysts (IS Analysts)

Five employees are classified as information services electronic equipment and systems specialist (IS EESS) and five employees are classified as IS analysts. The computer hardware repair and maintenance functions now performed by the IS EESS were moved from Clinical Engineering EESS to Information Services in January 2000. This transfer was made to improve customer service issues by integrating information systems and eliminating the conflict between hardware problems that had been addressed by Clinical Engineering and software problems handled by Information Services. The job duties and qualifications of the EESS employees did not change when they were transferred from Clinical Engineering to Information Services.

The IS EESS and IS analyst work side-by-side and perform repairs and preventive maintenance on PC peripherals, the PC itself, monitors, keyboards and servers. The IS EESS focus on diagnosing and repairing computer hardware while the IS analysts primarily work on

software although they also work on hardware. The IS EESS take apart computer boards, power supplies, fan motors and disk drives. They also move modem cards and replace circuitry in computers. The job duties and the educational and vocational requirements of the IS EESS are the same as the EESS I in Clinical Engineering. Thus, the IS EESS are required to have an associate's degree and equivalent experience with preference for education in electronic engineering technology. In addition, the IS EESS could have some type of Microsoft certification or training through a 1-day class. The IS EESS, like the EESS I in Clinical Engineering, is a job grade 13.

The IS analysts and EESS work in the same physical space. The job duties of the IS analyst include troubleshooting and problem solving; applying technical skills for repair, maintenance, and installation of computer equipment and systems; delivering business automation improvements; and require a high level of skill in analog and digital electronics, microprocessor based systems, data conversion and communication as well as skills and expertise in test equipment.

The IS analysts must have electronics aptitude and must exhibit competency in Microsoft software. The educational and vocational requirements for the IS analyst include a bachelor's degree in business, computer science or a related field, and 3 months to 1-year experience. None of the incumbents hold a bachelor's degree. The IS analysts are job grade 43, which are similar job grades 17, 18, 19 and 28.

2. The IS EESS and IS Analysts are Skilled Maintenance Employees who may Vote Challenged Ballots

Whether to include IS positions in a skilled maintenance unit in an acute care hospital has not been addressed in many Board cases. In Toledo Hospital, 312 NLRB at 655, the Board permitted the technical analyst, responsible for microcomputing equipment, to vote under the challenge procedure because the inclusion of the position raised questions requiring additional facts. In Jewish Hospital, 305 NLRB at 957, the computer engineers, the predecessors of the

EESS I and IS analysts, were included in a skilled maintenance unit. However, there, the Petitioner agreed in its post-hearing brief to include computer engineers in the unit, and in view of the evidence and record as a whole, and in agreement with the parties, the computer engineers were included in the unit. In Barnes Hospital, supra, the support services electronic technician was included in the unit, but the Board decision does not discuss the facts or reasons for inclusion.

The record establishes that the IS EESS perform the same duties and education requirements as the Clinical Engineering EESS I, who are included in the unit. Similarly, the IS analysts, like the IS EESS, repair, maintain and install computer equipment and systems. Thus, the IS EESS and IS analysts perform skilled maintenance work on the hospital's physical plant systems. Accordingly, I find that the IS EESS and IS analyst positions could be appropriately included in the skilled maintenance unit. However, the record establishes that the IS EESS and IS analysts are on the payroll of BJC Health Systems, rather than BJH. Where the record fails to establish that BJC Health Systems and BJH are a joint or single employer, the IS EESS and IS analysts will be permitted to vote under challenge.

D. Locksmiths are Skilled Maintenance Employees who may Vote Challenged Ballots

The Petitioner stipulated to the inclusion of one of the three locksmiths in the bargaining unit. The included locksmith is on the BJH payroll. The remaining two locksmiths are on the payroll of St. Louis Children's Hospital, another hospital in the BJC Health System. One of these two locksmiths is a full-time employee and the other is per diem. All three locksmiths spend 80 percent of their time on BJH projects, are supervised by BJH supervisors, and perform identical duties. The locksmith duties include picking locks, making keys, impressioning, decoding locks and master keying, as well as the repair and installation of locks. The educational and vocational requirements for the position require a high school diploma plus specialized training of 6 months to 2 years, locksmith school, and knowledge of master key systems. The locksmiths are job grade 11.

In these circumstances, the evidence shows that the locksmiths perform skilled maintenance work on hospital plant systems. Accordingly, I find that the full-time locksmith could be appropriately included in the skilled maintenance unit. The per diem locksmith could be included if he worked an average of 4 hours or more per week in the 13-week period preceding the eligibility cut-off date. Sisters of Mercy Health Corp., 298 NLRB 483 (1990), citing Davison-Paxon, 185 NLRB 21, 24 (1970). However, the record establishes that these two locksmiths are on the payroll of St. Louis Children's Hospital, rather than BJH. Where the record fails to establish that St. Louis Children's Hospital and BJH are a joint or single employer, these two locksmiths will be permitted to vote under challenge.

IV. Conclusion

Based upon the Board's Final Rule on Collective-Bargaining Units in the Health Care Industry and the above analysis of the transcript and exhibits, the following employees of the Employer constitute a unit appropriate for the purpose of collective bargaining within the meaning of Section 9(b) of the Act:

All full-time and regular part-time skilled maintenance employees, including senior HVAC/refrigeration mechanics, lead HVAC/refrigeration mechanics, utility workers, lead plumber, plumbers, insulator/plumber, lead electricians, senior electricians, lead mechanic, plant mechanics, lead stationary engineer, stationary engineers, senior GM mechanics, GM mechanics, lead carpenter, senior carpenters, lead painters, senior painters, biomedical techs I, II and III, electronic equipment and systems specialist I, II and III, radiology and imaging systems specialists I, II and III, clinical engineering projects coordinator, lead design and construction, construction techs I, II and III, IS analysts, IS electronic equipment and systems specialists I, locksmiths, and upholsterer employed by the Employer at its St. Louis, Missouri facility, EXCLUDING senior HVAC mechanic (BAS operator),³ mechanical engineer, electrical engineer,⁴ CADD operator/plans coordinator, wire/cable coordinator, signage fabricator, signage coordinator, contractor coordinator, office clerical and professional employees, guards, and supervisors⁵ as defined by the Act.

³ The parties agreed that this position is appropriately excluded from the unit.

⁴ The parties agreed that the mechanical engineer and electrical engineer are appropriately excluded from the unit.

⁵ The parties stipulated, and I agree, that the managers and supervisors of Facilities Engineering, the director and managers of Clinical Engineering, the manger and project

DIRECTION OF ELECTION⁶

An election by secret ballot shall be conducted by the undersigned among the employees in the unit found appropriate at the time and place set forth in the notice of election to be issued subsequently, subject to the Board's Rules and Regulations. Eligible to vote are those in the unit who were employed during the payroll period ending immediately preceding the date of this Decision, including employees who did not work during that period because they were ill, on vacation, or temporarily laid off. Also eligible are employees engaged in an economic strike which commenced less than 12 months before the election date and who retained their status as such during the eligibility period and their replacements. Those in the military services of the United States may vote if they appear in person at the polls. Ineligible to vote are employees who have quit or been discharged for cause since the designated payroll period, striking employees who have been discharged for cause since the strike began and who have not been rehired or

manager of Information Services, the project manager and supervisor of Design and Construction, and manager and supervisor of Housekeeping and Security are supervisors within the meaning of §2(11) of the Act.

⁶ As the unit found appropriate is larger than that requested, the Regional Director has administratively determined that the Petitioner has the requisite showing of interest to support an election in the unit found appropriate.

reinstated before the election date, and employees engaged in an economic strike that began more than 12 months before the election date and who have been permanently replaced. Those eligible shall vote whether or not they desire to be represented for collective bargaining purposes by Local Union No. 562, United Association of Journeymen and Apprentices of the Plumbing and Pipefitting Industry of the U.S. and Canada, AFL-CIO.

ELECTION NOTICES

In accordance with Section 102.30 of the Board's Rules and Regulations, the Employer shall post copies of the Board's official Notice of Election in conspicuous places at least 3 full working days prior to 12:01 a.m. of the day of the election. These notices are to remain posted until the end of the election. Failure to post the election notices as required will be grounds for setting aside the election whenever proper and timely objections are filed. A party is estopped from objecting to nonposting of notices if it is responsible for the nonposting. An employer shall be conclusively deemed to have received copies of the election notice for posting unless it notifies the Regional Office at least 5 working days prior to the commencement of the election that it has not received copies of the election notice. As used in this paragraph, the term "working day" means an entire 24-hour period excluding Saturdays, Sundays, and holidays.

LIST OF VOTERS

In order to assure that all eligible voters may have the opportunity to be informed of the issues in the exercise of their statutory right to vote, all parties to the election should have access to a list of voters and their addresses that may be used to communicate with them. *Excelsior Underwear, Inc.*, 156 NLRB 1236 (1966); *NLRB. v. Wyman-Gordon Co.*, 394 U.S. 759 (1969). Accordingly, it is hereby directed that an eligibility list containing the *full* names and addresses of all the eligible voters must be filed by the Employer with the Regional Director for Region 14 within 7 days of the date of this Decision and Direction of Election. *North Macon Health Care Facility*, 315 NLRB 359, 361 (1994). The list must be of sufficiently large type To Whom It May Concern: be clearly legible. I shall, in turn, make the list available to all parties to the election. In order to be

timely filed, such list must be received in the Regional Office at 1222 Spruce Street, Room 8.302, Saint Louis, Missouri, on or before November 27, 2000. No extension of time to file this list may be granted except in extraordinary circumstances, nor shall the filing of a request for review operate to stay the filing of such list. Failure to comply with this requirement shall be grounds for setting aside the election whenever proper objections are filed. The list may be submitted by facsimile transmission. Since the list is to be made available to all parties to the election, please furnish a total of **2** copies, unless the list is submitted by facsimile, in which case no copies need be submitted. To speed preliminary checking and the voting process itself, the names should be alphabetized (overall or by department, etc.). If you have any questions, please contact the Regional Office.

RIGHT TO REQUEST REVIEW

Under the provisions of Section 102.67 of the Board's Rules and Regulations, a request for review of this Decision may be filed with the National Labor Relations Board, addressed to the Executive Secretary, 1099 14th Street, N.W., Washington, D.C. 20570-0001. This request must be received by the Board in Washington by December 4, 2000.

Dated November 20, 2000
at St. Louis, Missouri

/s/ Ralph R. Tremain
Ralph R. Tremain, Regional Director
National Labor Relations Board
Region 14
1222 Spruce Street, Room 8.302
St. Louis, MO 63103-2829

470-5800
470-5801
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